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Bib Data Sheet

CONFIRMATION NO. 9333

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/749,386 | <b>FILING OR 371(c) DATE</b><br>01/02/2004<br><b>RULE</b> | <b>CLASS</b><br>800 | <b>GROUP ART UNIT</b><br>1638 | <b>ATTORNEY DOCKET NO.</b><br>247354US20DIV |
|------------------------------------|---|---------------------|-------------------------------|---|

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/824,734 04/04/2001 PAT 6,727,408 which claims benefit of 60/194,648 04/04/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 05/05/2004

**\*\* SMALL ENTITY \*\***

|  |                               |                             |                           |                                |
|--|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>AZ | <b>SHEETS DRAWING</b><br>11 | <b>TOTAL CLAIMS</b><br>42 | <b>INDEPENDENT CLAIMS</b><br>4 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                             |                           |                                |
| Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature   | Initials                      |                             |                           |                                |

**ADDRESS**

22850

**TITLE**

Proteins and DNA related to salt tolerance in plants

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|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>626 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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